

# monitor's checklist

2015-2016

- 1) Participant: \_\_\_\_\_ Social Security #: \_\_\_\_\_
- 2) Enrollment Date: \_\_\_\_\_ 5% Window Participant: \_\_\_\_yes \_\_\_\_no
- 3) Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
- 4) Emergency Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_
- 5) Emergency Contact Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Under WIA, eligibility for WIA youth programs depends in part on individuals financial circumstances. Listed below are the most commonly used eligibility criteria items. Check the 2013 WIA Eligibility Handbook for additional eligibility criteria items and/or explanations. Under WIA, the term "economically disadvantaged" means an individual who can meet at least one of the following criteria:

**6) Economic Eligibility**

Individual Status/Family Size: (REQUIRED FIELD - check one) \_\_\_\_self-attestation \_\_\_\_most recent tax return \_\_\_\_public assistance records \_\_\_\_social service agency records

AND check one (or more) of the following five categories:

1) Individual/Family Income: \_\_\_\_self-attestation \_\_\_\_pay stubs \_\_\_\_bank statements \_\_\_\_employer statement/contact \_\_\_\_social security benefits \_\_\_\_public assistance records \_\_\_\_unemployment insurance documents

**OR**

2) Proof of Receipt of Public Assistance or Food Support: is required IF it is directly pertinent to eligibility. \_\_\_\_public assistance case number and start date \_\_\_\_refugee assistance records

**OR**

3) Family of One: designation of a participant must be documented if it is directly pertinent to eligibility. **If youth with disability:** \_\_\_\_Individual Education Program (IEP) \_\_\_\_S.S.

Administration letter/records \_\_\_\_letter from drug or alcohol rehabilitation agency

**If youth is claiming financial independence:** \_\_\_\_an applicant statement attesting to their individual status, corroborated by the head of household in which the person resides, if possible. The youth must also show the source of his/her support.

**OR**

4) Homeless: \_\_\_\_self-attestation \_\_\_\_shelter or social service agency

**OR**

5) A Supported Foster Child Status: documentation must be obtained IF it is pertinent to eligibility. \_\_\_\_foster care case number \_\_\_\_written statement from state/local agency

**7) Documentation of applicable barrier (must check at least one)**

- ☐ Basic Skills deficient (TABE or CASAS test score in reading and/or math)  
☐ Educational attainment one or more grade levels below age level  
☐ Pregnant/parenting  
☐ Offender  
☐ Disabled Youth  
☐ Homeless, runaway or foster child  
☐ School Dropout  
☐ WSA 10 Approved Category is Minnesota State Statute 124D.68 (at risk of dropping out of an educational program, or inability to secure and hold employment).

**8) Documentation of Minneapolis residency (check one)**

☐ self-attestation ☐ driver's license or state identification card ☐ school identification card ☐ postmarked mail addressed to applicant ☐ public assistance record

**9) Date of Birth/Proof of Age (check one)**

☐ driver's license or state identification card ☐ school identification card ☐ birth certificate ☐ federal, state or local government identification card ☐ work permit ☐ official school record

**10) Proof of Name (check one)** ☐ driver's license or state identification card ☐ school identification card ☐ birth certificate ☐ public assistance record ☐ social service record ☐ federal, state or local government identification card ☐ official school record

**11) Documentation of Selective Service for males 18-21 (check one if applicable)**

☐ acknowledgement letter ☐ selective service registration record or card

**12) Documentation of Social Security # (check one)**

☐ Social Security Card ☐ W-2 form ☐ Social Security benefits ☐ official school records

**13) Citizenship/Alien Status (See 2013 Eligibility Handbook Attachment A, page 72 and list document used):** \_\_\_\_\_

**14) Career Interest Area(s)** \_\_\_\_\_ **Inventory used** \_\_\_\_\_

**15) Math level at intake** \_\_\_\_\_ **EFL** \_\_\_\_\_ **Test** \_\_\_\_\_

**16) Reading level at intake** \_\_\_\_\_ **EFL** \_\_\_\_\_ **Test** \_\_\_\_\_

**17) Supportive Services provided** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_